

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number D03051
In re Application of Application Number	ALL-OPTICAL WAVELENGTH CONVERTER CIRCUIT 10/774,308	
For Group Art Unit	Amarildo J.C. Viera 2638	
	Filed 2/6/04	RECEIVED CENTRAL FAX CENTER DEC 12 2005
	Examiner Wang, Leming	

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and appropriate non-small-entity fee are as follows: (check time period desired):

<input checked="" type="checkbox"/> One Month (37 CFR 1.17(a)(10))	\$120.00	\$ 120.00
<input type="checkbox"/> Two Months (37 CFR 1.17(a)(2))	\$450.00	\$
<input type="checkbox"/> Three Months (37 CFR 1.17(a)(3))	\$1020.00	\$
<input type="checkbox"/> Four Months (37 CFR 1.17(a)(4))	\$1590.00	\$
<input type="checkbox"/> Five Months (37 CFR 1.17(a)(5))	\$2160.00	\$

☐ Applicant claims small entity status. See 37 CFR 1.27. Therefore, the amount shown above is reduced by one-half, and the resulting fee is \$ _____

☐ A check in the amount of the fee is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

☒ The Director has already been authorized to charge fees in this application to a Deposit Account.

☒ The Director is hereby authorized to charge any fees which may be required or credit any overpayment, to Deposit Account Number 502117. The Deposit Account Name is Motorola, Inc.

I have enclosed a duplicate copy of this sheet.

I am the: 12/13/2005 SDENBOB1 00000033 502117 10774308

☐ Applicant/inventor 01 FC:1251 120.00 DA

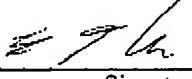
☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).

☒ Attorney or agent of record (Registration No.: 44,489)

☐ Attorney or agent under 37 CFR 1.34(a)
Registration number if acting under 37 CFR 1.34(a) _____

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

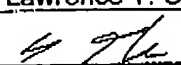
12/12/05
Date
215-323-1797
Telephone Number


Signature
Lawrence T. Cullen
Type or printed name

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required.
Submit multiple forms if more than one signature is required, see below.

☒ Total of 2 form(s) are submitted

This collection of information is required by 37 CFR 1.136(a). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 6 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Office, U.S. Patent and Trademark Office, U.S. Department of Commerce, P. O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450.

Effective on 12/08/2004 Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818)		Complete If Known	
FEE TRANSMITTAL For FY 2005		Application Number	10/774,308
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Filing Date	February 6, 2004
		First Named Inventor	Amarildo J.C. Viera
		Examiner Name	Wang, Leming
		Group Art Unit	2638
TOTAL AMOUNT OF PAYMENT		(\$)	120.00
METHOD OF PAYMENT (check all that apply)		Attorney Docket No.	D03051
<input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____ <input checked="" type="checkbox"/> Deposit Account Deposit Account Number: 502117 Deposit Account Name: MOTOROLA, INC. For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) <input checked="" type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) <input checked="" type="checkbox"/> Credit any overpayments under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.			
FEE CALCULATION			
1. BASIC FILING, SEARCH, AND EXAMINATION FEES			
FILING FEES		SEARCH FEES	
Application Type	Fee (\$)	Small Entity Fee (\$)	Small Entity Fee (\$)
Utility	300	150	250
Design	200	100	50
Plant	200	100	150
Reissue	300	150	250
Provisional	200	100	0
		EXAMINATION FEES	
		Small Entity Fee (\$)	Small Entity Fee (\$)
		200	100
		130	65
		160	80
		600	300
		0	0
		Fees Paid (\$)	
2. EXCESS CLAIM FEES			
Fee Description		Fee (\$)	Small Entity Fee (\$)
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent		50	25
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent		200	100
Multiple dependent claims		360	180
Total Claims			
18	- 20 or HP=	Extra Claims	Fee (\$)
		0	0
HP=highest number of total claims paid for, if greater than 20		Fee Paid (\$)	
		0	
Indep. Claims			
3	- 3 or HP=	Extra Claims	Fee (\$)
		0	0
HP=highest number of independent claims paid for, if greater than 3		Fee Paid (\$)	
		0	
3. APPLICATION SIZE FEE:			
If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).			
Total Sheets		Number of each additional 50 or fraction thereof	
	- 100 =	Extra Sheets	Fee (\$)
			Fee Paid (\$)
4. OTHER FEE(S)			
Non-English Specification, \$130 fee (no small entity discount)		Fee Paid (\$)	
Other: Request for Extension of Time		\$120.00	
SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	Lawrence T. Cullen	Registration No.	44,489
Signature		Telephone	215-323-1797
		Date	12/12/05

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